

D.I. # \_\_\_\_\_

**CIVIL ACTION****NUMBER:** \_\_\_\_\_

05 CV 881

U.S. POSTAL SERVICE  
CERTIFIED MAIL RECEIPT(S)

U.S. Postal Service™ <b>CERTIFIED MAIL™ RECEIPT</b> <i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
<b>OFFICIAL USE</b>	
Postage	\$ .41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.21
Civano-05-PPI-SL6	
Sent To First / Interim, Inc., d/b/a Gator Sports Bar Street, Apt. No.: 519 E. Basin Rd. or PO Box No. City, State, ZIP+4: New Castle, DE 19702	
See Reverse for Instructions	

7005 1820 0004 3169 6381

PS Form 3800, June 2002